CONTRIBUȚII LA DIAGNOZA DERMATOGLIFICĂ
A DIABETULUI ZAHARAT INSULINO-DEPENDENT
(TIPUL 1 DE DIABET ZAHARAT)

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CONTRIBUTIONS TO THE DERMATOGLYPHIC DIAGNOSIS OF INSULIN-DEPENDENT DIABETES MELLITUS OR DIABETES MELLITUS TYPE 1 (T1DM). The present paper deals with a study concerning the dermatoglyphics pathology on a lot of 133 subjects suffering from diabetes type 1 (58 men and 75 women) aut of which 58 are children and teen-agers with ages between 4 and 18 and suffering from this disease since they were between 2 and 17. The other 75 are adults and old people between 24 and 79 years of age suffering from this disease since they were between 22 and 75. In 52% of the cases the diabetes is primary insulin-dependent, and in 48% it is secondary insulin dependent. We gathered a total of 266 finger and palmar prints (116 from the masculine series and 150 from the feminine series).

We are entitled to say that both patients with a juvenile debut in diabetes and those with a late release of the disease present – in their finger and palmar picture – important distortions or anomalies with serious clinical implications, that at the level of the whole sample reach percentages that bring them close to those patients suffering from serious CVD and OD, but are different from the reference sample. These distortions, present to both the masculine and the feminine series, and on both hands of the affected people, but especially on the left hands are the graphic expression of the diabetogen genetic factor partially and of the external "triggers" from the uterus level in an early stage of prenatal life – the environment factors that act in the post-natal period being responsible for the release and clinical manifestation of the disease as such.

The results we got, even if they are the first of this type in our country, ***support the idea of using dermatoglyphs*** (a less costly and easier to reproduce in any stage of postnatal life) ***as markers***, together with metabolic, immunologic and genetic markers, in predicting a possible diabetogen risk at the population level.